

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

National Association of Insurance and Financial Advisors Political Action Comm

ADDRESS (number and street)

2901 Telestar Ct.

Check if different  
than previously  
reported. (ACC)

Falls Church

VA

22042

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00005249

3. IS THIS  
REPORTNEW  
(N)**OR**AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day  
**PRE**-Election  
Report for the:☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

in the  
State of

5. Covering Period

03

01

2008

through

03

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Peter C. Brown

Signature of Treasurer

Electronically Filed by Peter C. Brown

Date

04

18

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		389938.49
(b) Cash on Hand at Beginning of Reporting Period .....	395660.92	
(c) Total Receipts (from Line 19) .....	83753.10	220951.10
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	479414.02	610889.59
7. Total Disbursements (from Line 31) .....	116199.14	247674.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	363214.88	363214.88
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	25871.52	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	17334.15	43810.15
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	66418.95	177140.95
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	83753.10	220951.10
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	83753.10	220951.10
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	83753.10	220951.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	83753.10	220951.10

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	12115.14	83082.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	12115.14	83082.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	104000.00	164500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	84.00	92.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	84.00	92.50
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	116199.14	247674.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	116199.14	247674.71

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	83753.10	220951.10
34. Total Contribution Refunds (from Line 28(d)) .....	84.00	92.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	83669.10	220858.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12115.14	83082.21
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	12115.14	83082.21

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. David G. Zick

Mailing Address 851 Adams Court

City

Bloomfield Hills

State

MI

Zip Code

48304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Group Associates, Inc.

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 0 8

Transaction ID: 6665268

Amount of Each Receipt this Period

625.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Timothy J. O'Connor

Mailing Address 2112 West John St.

City

Grand Island

State

NE

Zip Code

68803-5815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
O'Connor & Associates Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 4 / 2 0 0 8

Transaction ID: 6665278

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Raymond J. Triplett

Mailing Address 16171 Hillvale Ave

City

Monte Sereno

State

CA

Zip Code

95030-4159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 0 8

Transaction ID: 6665292

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Reginald N. Rabjohns

Mailing Address 8700 West Bryn Mawr Ave Ste 600 S.

City

Chicago

State

IL

Zip Code

60631-3507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rabjohns Financial Group

Occupation

Managing Partner

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Transaction ID: 6665330

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. William R. Rowe

Mailing Address 10201 S.W. 82 Court

City

Miami

State

FL

Zip Code

33156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation

Insurance Agent

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Transaction ID: 6665390

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. John E. Parham, Jr.

Mailing Address 3322 West End Ave #201

City

Nashville

State

TN

Zip Code

37203-6816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Parham Agency

Occupation

Branch Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Transaction ID: 6665398

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Glenn R. Jagodzinske

Mailing Address 6623 SW Gisbourne Court

City State Zip Code  
Topeka KS 66614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life Insurance  
Company

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: 6665458

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Matthew S. Tassey

Mailing Address 5 Reggio Ave.

City State Zip Code  
Old Orchard Beach ME 04064-2709

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Burwell & Burwell

Occupation  
Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6665524

Amount of Each Receipt this Period

72.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kent A. Bennett

Mailing Address 280 Hollow Road

City State Zip Code  
Muncy PA 17756-5789

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kent A. Bennett & Assoc.,  
Inc.

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6665542

Amount of Each Receipt this Period

87.50

**SUBTOTAL** of Receipts This Page (optional) .....

459.50

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 46

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael F. Scovel

Mailing Address 20 W. Mundhank Rd

City

Barrington

State

IL

Zip Code

60010-9557

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	0	8

Transaction ID: 6665582

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Edward A. Zabielski, Jr.

Mailing Address 104 Clay Ct.

City

Landenberg

State

PA

Zip Code

19350

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Edward A. Zabielski Jr &  
Co.

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	8

Transaction ID: 6665688

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Ronald D. Brant

Mailing Address 10234 Hoffman

City

Maybee

State

MI

Zip Code

48159-9777

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jefferson Pilot Financial

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	8

Transaction ID: 6665808

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional) .....

813.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. James W. Oglesby

Mailing Address P. O. Box 1555

City

ENKA

State

NC

Zip Code

28728

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
J.W. Oglesby & Associates

Occupation

Senior Sales Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6665826

Amount of Each Receipt this Period

143.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Lawrence E. Lounds

Mailing Address 2477 Valley Oaks Circle

City

Flint

State

MI

Zip Code

48532

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Security 1st Benefits Cor-  
p.

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6665858

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Daniel J. Scholz

Mailing Address 1510 So. 183 Circle

City

Omaha

State

NE

Zip Code

68130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ameritas Financial Servic-  
es

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6665870

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional) .....

373.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Carl James Maus

Mailing Address 432 Fort Saratoga

City

Saint Charles

State

MO

Zip Code

63303-1766

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Insurance and Investment  
Services

Occupation

Career Development Supervisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.20

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6666034

Amount of Each Receipt this Period

50.40

**B.**

Full Name (Last, First, Middle Initial)

Mr. David A. Middaugh

Mailing Address 3273 Evergreen Road

City

Fargo

State

ND

Zip Code

58102-1214

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Middaugh & Associates, In-  
c.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6666036

Amount of Each Receipt this Period

126.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. M. Jay Einstein

Mailing Address 59 Margarete Dr.

City

Pittsgrove

State

NJ

Zip Code

08318-3015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6666270

Amount of Each Receipt this Period

72.00

**SUBTOTAL** of Receipts This Page (optional) .....

248.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. John A. Davidson

Mailing Address 1497 Rancho Lane

City

Thousand Oaks

State

CA

Zip Code

91362-2651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Davidson Insurance & Fina-  
ncial Service

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6666282

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Vincent M. D'Addona

Mailing Address 141 Greenway Road

City

Lido Beach

State

NY

Zip Code

11561-4828

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
D'Addona Rosenbaum

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6666302

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert M. Roach

Mailing Address 1287 Harrison Pond Drive

City

New Albany

State

OH

Zip Code

43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NMFN - Kemelgor Financial  
Group

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6666576

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional) .....

335.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Lance B. Kolbet

Mailing Address 4632 Mountain Park Rd.

City

Pocatello

State

ID

Zip Code

83202-1702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University Financial Group

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6666628

Amount of Each Receipt this Period

126.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Martin Montefel

Mailing Address 16932 SW 5th Way

City

Weston

State

FL

Zip Code

33326-1564

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Montefel Inc.

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.50

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6666680

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Terry M. Kaltenbach

Mailing Address 1358 Ahlrich Ave

City

Encintas

State

CA

Zip Code

92024-4029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phoenix Life

Occupation  
Wealth Management Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6666752

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional) .....

301.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Larry J. Winkelhake

Mailing Address 18600 Longview Ct

City

Brookfield

State

WI

Zip Code

53045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mortensen-Winkelhake

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6666772

Amount of Each Receipt this Period

90.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Thomas E. Fowler

Mailing Address 13243 S.E. 51st Place

City

Bellevue

State

WA

Zip Code

98006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fowler Financial Services,  
Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.50

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6666906

Amount of Each Receipt this Period

107.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. William James DeBruin

Mailing Address 106 Edgewood Ln

City

Combined Locks

State

WI

Zip Code

54113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
William J. DeBruin Financial Services,

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6666920

Amount of Each Receipt this Period

72.00

**SUBTOTAL** of Receipts This Page (optional) .....

269.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. David E. Smithkey

Mailing Address 9451 Heddy Drive

City  
Flushing

State  
MI

Zip Code  
48433

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Security First Benefits  
Corp.

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6667022

Amount of Each Receipt this Period

208.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Russell A. Smith

Mailing Address 22928 San Joaquin Drive East

City  
Canyon Lake

State  
CA

Zip Code  
92587-7831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Torimax Financial Group,  
Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6667048

Amount of Each Receipt this Period

208.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. H. Dan Smith

Mailing Address 1616 Rio Vista

City  
Dallas

State  
TX

Zip Code  
75208-2338

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6667085

Amount of Each Receipt this Period

215.00

**SUBTOTAL** of Receipts This Page (optional) .....

631.50

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 46

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Daniel L. Rust

Mailing Address 114 W. Arnold

City

Bozeman

State

MT

Zip Code

59715-6129

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	8

Transaction ID: 6667161

Amount of Each Receipt this Period

90.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. David M. Koll

Mailing Address 1612 S. 152nd Street

City

Omaha

State

NE

Zip Code

68144-5121

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mutual of Omaha

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	8

Transaction ID: 6667197

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. R. Jan Pinney

Mailing Address 5152 Ellington Court

City

Granite Bay

State

CA

Zip Code

95746-7188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pinney Insurance Center,  
Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	8

Transaction ID: 6667281

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional) .....

403.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael J. Ables

Mailing Address PO Box 2205

City

Avila Beach

State

CA

Zip Code

93424-2205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Michael Ables Insurance  
Services

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6667311

Amount of Each Receipt this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. James R. Christensen, Jr.

Mailing Address 440 Regency Pkwy Dr #139

City

Omaha

State

NE

Zip Code

68114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSOURCE, Inc.

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6668147

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard L. Hoover

Mailing Address 2920 S. Jones Blvd., #110

City

Las Vegas

State

NV

Zip Code

89146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hoover and Associates

Occupation  
Agency Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6668391

Amount of Each Receipt this Period

72.00

**SUBTOTAL** of Receipts This Page (optional) .....

302.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Robert J. Hollander

Mailing Address 904 Rockhurst Dr.

City

Lincoln

State

NE

Zip Code

68510-4114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farm Bureau Insurance Ser-  
vices

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.50

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6668401

Amount of Each Receipt this Period

112.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Todd G. Grantham

Mailing Address 203 Brandermill Drive

City

Durham

State

NC

Zip Code

27713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual Finan-  
cial Network

Occupation  
Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.50

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6668920

Amount of Each Receipt this Period

115.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Terry K. Headley

Mailing Address 20704 Meadow Ridge Dr

City

Springfield

State

NE

Zip Code

68059-7086

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Headley / Scott & Associa-  
tes

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6669376

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional) .....

436.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Ellen E. Burmester

Mailing Address 9178 Rolling Tree Lane

City

Fair Oaks

State

CA

Zip Code

95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6669834

Amount of Each Receipt this Period

-250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Mark A. Chandik

Mailing Address 42 Ritz Cove Drive

City

Dana Point

State

CA

Zip Code

92629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Financial Diligence Part-  
ners

Occupation  
Agent/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6670325

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. James E. Mitchell

Mailing Address 2209 Ontario

City

Bellingham

State

WA

Zip Code

98229-4027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Financial Se-  
rvices

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6671145

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional) .....

-70.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Joseph A. Sztapka

Mailing Address 3705 S. Judy Ave

City

Sioux Falls

State

SD

Zip Code

57103-7248

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Modern Woodmen of America

Occupation

Agency Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6671175

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Steven M. Stratton

Mailing Address 17131 Parkview Dr

City

Morgan Hill

State

CA

Zip Code

95037-6606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capital Planning Partners,  
LLC

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6671981

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Cliff F. Wilson

Mailing Address 1458 W. Bahia Court

City

Gilbert

State

AZ

Zip Code

85233-5600

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southeast Arizona Ins. Se-  
rvices, LTD /

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6672185

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional) .....

306.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Boyd Lee Williams

Mailing Address 7023 W. Williamette Ave

City

Kennewick

State

WA

Zip Code

99336-1280

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kansas City Life Insurance  
Company

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6672217

Amount of Each Receipt this Period

208.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Paul Adams

Mailing Address 5101 Missy Maric Lane

City

Las Vegas

State

NV

Zip Code

89130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clearline Financial Group

Occupation

Field Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6672801

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

Mr Joseph L Morton, III

Mailing Address 5487 N. Bach

City

Meridian

State

ID

Zip Code

83642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Intermountain Legal Group

Occupation

Attorney At Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6672821

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional) .....

484.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Diane K. Neely

Mailing Address 6635 SW Ventura Dr

City

Portland

State

OR

Zip Code

97223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 8

Transaction ID: 6673703

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Will S. Hornsby, III

Mailing Address Heritage Plz., 111 Vertans Blvd St

City

Metairie

State

LA

Zip Code

70005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: 6673753

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert J. Wernecke

Mailing Address 10456 North 134th Way

City

Scottsdale

State

AZ

Zip Code

85259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ECA Financial Services,  
Inc

Occupation

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: 6673819

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional) .....

955.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. John P. Border

Mailing Address 309 Truxtun Avenue

City

Bakersfield

State

CA

Zip Code

93301-5313

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Transaction ID: 6673827

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Todd S. Healy

Mailing Address 3624 University

City

Dallas

State

TX

Zip Code

75205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IPS Advisors, Inc.

Occupation

PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Transaction ID: 6673839

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. James M. Pollock

Mailing Address 10 Foxtail

City

Portola Valley

State

CA

Zip Code

94028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pollock Financial Group

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 7 / 2 0 0 8

Transaction ID: 6673960

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Edward R. Clink

Mailing Address 1263 W. Square Lake Rd.

City

Bloomfield Hills

State

MI

Zip Code

48302-0845

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ed Clink & Associates

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 7 / 2 0 0 8

Transaction ID: 6674100

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. William P. Krause

Mailing Address 1765 Elbow Lane

City

Allentown

State

PA

Zip Code

18103-9654

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Krause Financial Services

Occupation

Financial Services Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 1 / 2 0 0 8

Transaction ID: 6674124

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Simon Singer

Mailing Address 4266 Valley Meadow Road

City

Encino

State

CA

Zip Code

91436-3439

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nationwide Provident

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 8

Transaction ID: 6674192

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. James Kageleiry

Mailing Address 8 Hayes Lane

City

Dover

State

NH

Zip Code

03820-4213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 8

Transaction ID: 6674200

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Edward Wah Chin

Mailing Address 951 Augusta Drive

City

Moraga

State

CA

Zip Code

94556-1057

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
A. I. S.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 8

Transaction ID: 6674230

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael J. Bussard

Mailing Address 5256 Lysander Lane

City

Brentwood

State

TN

Zip Code

37027-3110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pacific Life Insurance Co-  
mpany

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 1 / 2 0 0 8

Transaction ID: 6674260

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Gwen M. Middeke

Mailing Address 55 Forest Valley Ct.

City

Saint Charles

State

MO

Zip Code

63301-0547

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Todd Organization of St.  
Louis

Occupation  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Transaction ID: 6674376

Amount of Each Receipt this Period

600.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Michael L. Kerley

Mailing Address 2901 Telestar Court

City

Falls Church

State

VA

Zip Code

22042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAIFA

Occupation  
Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.25

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 0 8

Transaction ID: 6674394

Amount of Each Receipt this Period

52.25

**C.**

Full Name (Last, First, Middle Initial)

Mr. Gary W. Hirschkrone

Mailing Address 104 Avenue B

City

New York

State

NY

Zip Code

10009-6286

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Equitable

Occupation  
Sr. Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: 6674410

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

902.25

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 46

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Martin F. Palumbos

Mailing Address 87 Parkside Lane

City

Rochester

State

NY

Zip Code

14612-3231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sagemark Consulting

Occupation

Certified Financial Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	8

Transaction ID: 6674434

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Michael L. Weintraub

Mailing Address 2372 Hagen Oaks Dr

City

Alamo

State

CA

Zip Code

94507-2209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Contemporary Pensions Inc.

Occupation

President &amp; CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	8

Transaction ID: 6674460

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Marilyn Lewis

Mailing Address 321 West Winnie Lane #106

City

Carson City

State

NV

Zip Code

89703-2154

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	8

Transaction ID: 6674464

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional) .....

1350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Scott R. Bunkers

Mailing Address 1320 Magnolia Bay Ct.

City

Maitland

State

FL

Zip Code

32751-6472

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Insurance Consultants Cen-  
tral FL

Occupation  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: 6674474

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Lisa M. Harmon, JD, CLU, ChF

Mailing Address 4001 Hobbs Road

City

Greensboro

State

NC

Zip Code

27410-3762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jefferson Pilot Financial

Occupation  
VP-Adv. Marketing Programs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Transaction ID: 6674520

Amount of Each Receipt this Period

550.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Mark J. Heurung

Mailing Address 18443 Melissa Cir.

City

Eden Prairie

State

MN

Zip Code

55347

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columns Resource Group

Occupation  
District Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 8 / 2 0 0 8

Transaction ID: 6674532

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Paul J. McGoldrick

Mailing Address P. O. Box 439  
106 Main St

City State Zip Code  
Littleton NH 03561-0439

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Northeast Planning Associ-  
ates, Inc.

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: 6674568

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Paul J. McGoldrick

Mailing Address P. O. Box 439  
106 Main St

City State Zip Code  
Littleton NH 03561-0439

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Northeast Planning Associ-  
ates, Inc.

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: 6674570

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Sherry S. McGhee

Mailing Address 1668 Navajo Dr

City State Zip Code  
Saint George UT 84790

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Sherry S. McGhee Ins Agen-  
cy Inc.

Occupation  
President/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 0 8

Transaction ID: 6674574

Amount of Each Receipt this Period

275.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Joshua Beecher

Mailing Address 1504 W 1230 N

City

Saint George

State

UT

Zip Code

84770-4240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Josh Beecher Agency

Occupation

Investment Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 0 8

Transaction ID: 6674578

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Michael J. Brink

Mailing Address 2100 Riveredge Pkwy. #200

City

Atlanta

State

GA

Zip Code

30328-4663

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nease, Lagana, Eden & Cul-  
ly

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: 6674616

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Carl H. Aronson

Mailing Address 8541 N.W. Reed Dr.

City

Portland

State

OR

Zip Code

97229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 0 8

Transaction ID: 6674780

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

660.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Carl H. Aronson

Mailing Address 8541 N.W. Reed Dr.

City

Portland

State

OR

Zip Code

97229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 8

Transaction ID: 6674782

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Ellen E. Burmester

Mailing Address 9178 Rolling Tree Lane

City

Fair Oaks

State

CA

Zip Code

95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 8

Transaction ID: 6674784

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. J. Edward McClendon

Mailing Address 4951 State Route #60. N.

City

Wakeman

State

OH

Zip Code

44889-8605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mc Clendon and Associates

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 8

Transaction ID: 6674810

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Joshua Beecher

Mailing Address 1504 W 1230 N

City

Saint George

State

UT

Zip Code

84770-4240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Josh Beecher Agency

Occupation

Investment Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 8

Transaction ID: 6674840

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Charles B. Prothro

Mailing Address 2028 Avondale

City

Wichita Falls

State

TX

Zip Code

76308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Charles Prothro Financial

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 8

Transaction ID: 6674844

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Scott Engell

Mailing Address 757 Armadillo Drive

City

Deltona

State

FL

Zip Code

32725-2651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Engell Insurance Brokerag-  
e, Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 8

Transaction ID: 6674846

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Albert Moriarty

Mailing Address 245 N 14th Street

City

Grover Beach

State

CA

Zip Code

93433-2253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Moriarty Enterprises

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 0 8

Transaction ID: 6674867

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

17334.15

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 46

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

NAIFA

Mailing Address 2901 Telestar Ct

City Falls Church State VA Zip Code 22042

Purpose of Disbursement  
Payroll, benefits, supplies, copies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 6705419

Date of Disbursement

03 / 27 / 2008

Amount of Each Disbursement this Period

9864.83

Payroll, benefits, supplies, copies

**B.**

Full Name (Last, First, Middle Initial)

Wachovia

Mailing Address P.O. box 40031

City Roanoke State VA Zip Code 24022-0031

Purpose of Disbursement  
Bank Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 6705418

Date of Disbursement

03 / 28 / 2008

Amount of Each Disbursement this Period

2250.31

Bank Fees

SUBTOTAL of Disbursements This Page (optional) .....

12115.14

TOTAL This Period (last page this line number only) .....

12115.14

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Dan Burton for Congress

Mailing Address Box 50593

City  
Indianapolis

State  
IN

Zip Code  
46250

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Dan Burton

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN District: 05

2008 US Primary

Transaction ID: 6567000

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

Marion Berry for Congress

Mailing Address P.O. Box 8084

City  
Jonesboro

State  
AR

Zip Code  
72403

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Marion Berry

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AR District: 01

2008 US Primary

Transaction ID: 6566999

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Matheson for Congress

Mailing Address 677 South 200 West, Suite A

City  
Salt Lake City

State  
UT

Zip Code  
84101

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
James Matheson

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: UT District: 02

2008 US Primary

Transaction ID: 6567005

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Freedom Fund

Mailing Address 128 North Columbus Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 6566990

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Lindsey Graham for Senate

Mailing Address PO Box 1155

City Seneca State SC Zip Code 29679

Purpose of Disbursement

Candidate Name  
Lindsey Graham

Office Sought: ☐ House  
☒ Senate  
☐ President

State: SC District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

2008 US Primary

Transaction ID: 6567003

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

Becerra for Congress

Mailing Address PO Box 261060

City Los Angeles State CA Zip Code 90026

Purpose of Disbursement

Candidate Name  
Xavier Becerra

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 31

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

2008 US Primary

Transaction ID: 6569193

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Pallone for Congress Committee

Mailing Address PO Box 3176

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Frank Pallone

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 06

Transaction ID: 6569494

Date of Disbursement

03 / 05 / 2008

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
Pete Sessions for Congress

Mailing Address PO Box 38585

City Dallas State TX Zip Code 75238

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Pete Sessions

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 32

2008 US Primary

Transaction ID: 6569551

Date of Disbursement

03 / 05 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Betty Sutton for Congress

Mailing Address 1700 W. Market Street, Suite 155

City Akron State OH Zip Code 44313

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Betty Sutton

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 13

Transaction ID: 6569489

Date of Disbursement

03 / 05 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Barrett for Congress

Mailing Address P.O. Box 869

City

Westminster

State

SC

Zip Code

29693

Purpose of Disbursement

011

Category/  
Type

Candidate Name

J. Gresham Barrett

Office Sought:

☒

House

☐

Senate

☐

President

State: SC

District: 03

Disbursement For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

2008 US Primary

Transaction ID: 6569858

Date of Disbursement

03 / 06 / 2008

Amount of Each Disbursement this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

Brad Miller Congressional Campaign

Mailing Address PO Box 20307

City

Raleigh

State

NC

Zip Code

27619

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Bradley Miller

Office Sought:

☒

House

☐

Senate

☐

President

State: NC

District: 13

Disbursement For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

2008 US Primary

Transaction ID: 6569859

Date of Disbursement

03 / 06 / 2008

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Ed Royce for Congress

Mailing Address P.O. Box 2525

City

Orange

State

CA

Zip Code

92859

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Edward Royce

Office Sought:

☒

House

☐

Senate

☐

President

State: CA

District: 40

Disbursement For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

2008 US Primary

Transaction ID: 6617555

Date of Disbursement

03 / 11 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 46

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Growth & Prosperity PAC

Mailing Address 1155 21st Street, NW/Suite 300

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 6617398

Date of Disbursement

03 / 11 / 2008

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Blue Dog PAC

Mailing Address P.O. Box 7668

City  
Washington

State  
DC

Zip Code  
20004

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 6617397

Date of Disbursement

03 / 11 / 2008

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

David Scott for Congress

Mailing Address 162 Hurt Street NE

City  
Atlanta

State  
GA

Zip Code  
30307

Purpose of Disbursement

011

Category/  
Type

Candidate Name

David Scott

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 13

2008 US Primary

Transaction ID: 6617392

Date of Disbursement

03 / 11 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

12500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 46

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) Charlie Ross for Congress	<b>Transaction ID:</b> 6635538 <b>Date of Disbursement</b>																				
Mailing Address PO Box 5993	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	8												
City State Zip Code Brandon MS 39047	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Charlie Ross	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 US Runoff																				
<b>B.</b> Full Name (Last, First, Middle Initial) Johannis For Senate Incorporated	<b>Transaction ID:</b> 6635503 <b>Date of Disbursement</b>																				
Mailing Address 1201 O Street Suite 101	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	8												
City State Zip Code Lincoln NE 68506	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Mr. Michael O. Johannis	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2008 US Primary																				
<b>C.</b> Full Name (Last, First, Middle Initial) McClintock for Congress	<b>Transaction ID:</b> 6635524 <b>Date of Disbursement</b>																				
Mailing Address 1029 K Street, Suite 44	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	8												
City State Zip Code Sacramento CA 95814	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Candidate Name Thomas McClintock	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2008 US Primary																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**12500.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) Jackie Speier for Congress	<b>Transaction ID:</b> 6635535 <b>Date of Disbursement</b>																				
Mailing Address PO Box 112	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	8												
City Burlingame State CA Zip Code 94011	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Candidate Name Jackie Speier	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 12	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2008 US Primary																				
<b>B.</b> Full Name (Last, First, Middle Initial) Sam Farr for Congress	<b>Transaction ID:</b> 6636480 <b>Date of Disbursement</b>																				
Mailing Address 555 Capitol Mall Suite 1425	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	8												
City Sacramento State CA Zip Code 95814	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Void - Sam Farr for Congress	<table border="1"> <tr> <td>-1000.00</td> </tr> </table>	-1000.00																			
-1000.00																					
Candidate Name Sam Farr	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 17	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2008 US Primary																				
<b>C.</b> Full Name (Last, First, Middle Initial) Clay Jr. for Congress	<b>Transaction ID:</b> 6636469 <b>Date of Disbursement</b>																				
Mailing Address 625 N Euclid Avenue, Suite 200	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	8												
City St. Louis State MO Zip Code 63108	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Void - Clay Jr. for Congress	<table border="1"> <tr> <td>-1000.00</td> </tr> </table>	-1000.00																			
-1000.00																					
Candidate Name William Clay	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2008 US Primary																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**500.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Sam Farr for Congress

Mailing Address 555 Capitol Mall Suite 1425

City State Zip Code  
 Sacramento CA 95814

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
 Sam Farr

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 17

2008 US Primary

Transaction ID: 6637987

Date of Disbursement

03 / 21 / 2008

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Geoff Davis for Congress

Mailing Address 3161 Dixie Highway  
 Suite F

City State Zip Code  
 Erlanger KY 41018

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
 Geoffrey Davis

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: KY District: 04

2008 US Primary

Transaction ID: 6638350

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

The Reed Committee

Mailing Address PO Box 8628

City State Zip Code  
 Cranston RI 02920

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
 Jack Reed

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: RI District:

Transaction ID: 6638351

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 46

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Committee to Elect Lincoln Davis

Mailing Address PO Box 350

City Jamestown State TN Zip Code 38556

Purpose of Disbursement

Candidate Name  
Davis

Office Sought: ☒ House  
☐ Senate  
☐ President

State: TN District: 04

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼  
2008 US Primary

Transaction ID: 6638349

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
Norm Coleman for US Senate

Mailing Address 1410 Energy Park Drive #11

City Saint Paul State MN Zip Code 55108

Purpose of Disbursement

Candidate Name  
Norm Coleman

Office Sought: ☐ House  
☒ Senate  
☐ President

State: MN District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 6639427

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
Fossella for Congress

Mailing Address PO Box 060248  
New Dorp Station

City Staten Island State NY Zip Code 10306

Purpose of Disbursement

Candidate Name  
Vito Fossella

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NY District: 13

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼  
2008 US Primary

Transaction ID: 6639428

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 46

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Jeb Hensarling	<b>Transaction ID:</b> 6639430 <b>Date of Disbursement</b>																				
Mailing Address PO Box 820504	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	7		2	0	0	8												
City Dallas State TX Zip Code 75382	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Candidate Name Jeb Hensarling	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 05	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) RED PAC	<b>Transaction ID:</b> 6639435 <b>Date of Disbursement</b>																				
Mailing Address 437B New Jersey Avenue, SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	7		2	0	0	8												
City Washington State DC Zip Code 20003	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Committee	<b>Transaction ID:</b> 6639431 <b>Date of Disbursement</b>																				
Mailing Address 320 First Street SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	7		2	0	0	8												
City Washington State DC Zip Code 20003	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>15000.00</td> </tr> </table>	15000.00																			
15000.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**21500.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Democratic Senatorial Campaign Committee

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 6639433

Date of Disbursement

/   /

Amount of Each Disbursement this Period

15000.00

**B.**

Full Name (Last, First, Middle Initial)

NoDak PAC

Mailing Address PO Box 75214

City Washington State DC Zip Code 20013

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 6639432

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

20000.00

**TOTAL** This Period (last page this line number only) .....

104000.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 46 / 46

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial) of Debtor or CreditorNational Association of Insurance and Financial Advisors  
Political Action Comm

Nature of Debt (Purpose):

Payroll, Benefits, Suppl-  
es, Copies

Mailing Address 2901 Telestar Ct

City

State

ZIP Code

Falls Church

VA

22042

Outstanding Balance Beginning This Period

35736.35

Transaction ID: 6705621

Amount Incurred This Period

0.00

Payment This Period

9864.83

Outstanding Balance at Close of This Period

25871.52

1) **SUBTOTALS** This Period This Page (optional)..... ▶

25871.52

2) **TOTALS** This Period (last page this line number only)..... ▶

25871.52

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

25871.52